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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known Application Number 10/566,470-Conf. #3906					
				Application Number		January 31, 2006			
FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1,27							rumihiro YAGUCHI		
						P. E. Stimper			
				0710					
TOTAL AMOUNT OF PAYM		(\$) 940.00		art Unit		0038-0487PUS1			
TOTAL AMOUNT OF FATMI	<i>F</i>	Attorney Docket No. 0038-0487Pt			731				
METHOD OF PAYME	VT (check al	l that apply)							
Check Credit		Money Order	None		please identif	· —			
X Deposit Account Dep	oosit Account Nu	mber: 02-	2448	Deposit A	Account Name	Birch, Stewa	irt, Kolasch & E	lirch, LLP	
For the above-ider	ntified depos	it account, the D	irector is h	ereby authorize	d to: (ched	ck all that apply	()		
x Charge fee(s	s) indicated b	pelow		Charge	e fee(s) ind	dicated below,	except for th	e filing fee	
fee(s) under	additional fee 37 CFR 1.16	e(s) or underpay and 1.17	ments of	x Credit	any overpa	ayments			
FEE CALCULATION									
1. BASIC FILING, SEARC	•								
	FILI	NG FEES Small Entity	SEAF	CH FEES Small Entity	EXAMIN	NATION FEES Small Entity	_		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								mall Entity	
<u>Fee Description</u> Each claim over 20 (includ	ding Reissue	es)					<u>Fee (\$)</u> 52	<u>Fee (\$)</u> 26	
Each independent claim o	-	•					220	110	
Multiple dependent claims	3						390	195	
Total Claims Ex	ktra Claims	Fee (\$)	Fee	Fee Paid (\$)		Multiple Depen			
	- or HP = x =			Fee (\$)		e (\$)	Fee Paid (\$)		
HP = highest number of total cl	•	•						_	
Indep. Claims Ex	ktra Claims	<u>Fee (\$)</u> x =	Fee	Paid (\$)					
HP = highest number of indepe			1 3.						
3. APPLICATION SIZE FE	_								
If the specification and di listings under 37 CFR sheets or fraction there	1.52(e)), the	e application siz	e fee due i	s \$270 (\$135 fe					
Total Sheets	Extra Sheets	Number o	of each add	itional 50 or frac			Fee P	aid (\$)	
4. OTHER FEE(S)		/50 =			ie number)	х	Fees F	Paid (\$)	
Non-English Specificat Other (e.g., late filing s	ion, \$130 f	ee (no small ent 1801 Request t	ity discoui for contini	ιτ <i>)</i> ued examinati	ion (RCF) (see 37	810	0.00	
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SUBMITTED BY		, , /							
/1/	£[-//		gistration No.	28,380	Telephone	(703) 205	-8015	
SUBMITTED BY Signature Name (Print Super) James M	1. Slattery	-//		egistration No. torney/Agent)	28,380	Telephone Date	(703) 205 February 2		